

PERTH AND KINROSS COUNTY COUNCIL

COUNTY HEALTH DEPARTMENT

R E P O R T on

the

SCHOOL HEALTH SERVICE

for the year ending 31st July, 1957

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INTRODUCTION.

This Report for the year 1956-57 follows the usual lines laid down by the Department of Health. The figures are very similar to those of previous years and show that the general health of the school population is being maintained at a satisfactory level.

In last year's Report, 1955-56 was described as a difficult year. 1956-57 has been no less difficult. The outbreak of ringworm of the scalp at Kinross, which started in the Spring term of 1956, has required constant surveillance during this session, which is still continuing. Tuberculin testing and B.C.G. vaccination were carried out as usual, as were the annual X-ray examinations of school children by the M.M.R. Unit. Unit time was again not available to cover all school staffs this year, but Eastern Perth and most of Highland Districts were done. It is hoped to be able to revert to annual examinations from next session onwards. Vaccination against poliomyelitis was resumed at the end of 1956, and a steady supply of vaccine was received during the remainder of the session.

All these activities are additional to the normal routine work of the School Health Service, and since this has been maintained at the increased level of recent years, the pressure has been considerable. The services of an additional part-time medical officer have been available since the beginning of the new session, and so far this has proved sufficient to enable us to cope with the work.

Only three Dental Officers were available during the session, but an appointment was made with effect from 1st October, 1957, and at the time of writing there is some hope of filling the fifth post in the authorised staff complement. In his Report, the Senior Dental Officer makes certain suggestions as to improvements in equipment, which I would recommend be approved by the Council.

Considerable progress has been made during the year in other directions. In 1954-55 the County Council approved of the appointment of an audiometrician, but because of training difficulties it was not possible to make this effective until early in 1957, when an appointment was made and training provided through the courtesy of our friends in the Dundee School Health Service, to whom we are much indebted. Details of the work done are given in the Report.

The work of the Educational Psychologist is now established on a firm basis. From the numbers presented, it is clear that there is ample work for another Psychologist and we look forward to the development of a full Child Guidance Service in the near future.

Two Speech Therapists were available during the session, but here again there is a very large waiting list of children requiring attention.

Provision for mentally handicapped children is beginning to look more hopeful. During the session the Special Class in Perth was restarted and two classes should be available next session. The voluntary occupation centre at Blairgowrie has now been taken over by the Education Committee, and it is expected that a Perth Centre will be started early in the new session. Admission of cases requiring institutional care is still extremely difficult to secure, but there is now some hope of amelioration shortly. Plans for the new residential school for educable mentally handicapped children are going ahead, but whilst the present financial difficulties are fully appreciated, these children have already had to wait a very long time for their special school, and it will be very regrettable indeed if anything further comes along to delay this very much needed scheme.

Perusal of the Reports for the last ten post-war years shows the steady progress which has been made. In many ways the work has become much more demanding, but at the same time much more interesting, since so much more can now be done for the individual children. At the same time there has been a steady improvement in the facilities for our work in the schools, and for this, and/

and for the constant encouragement and help we have received from the County Council, the Headmasters, the Teachers and the General Practitioners throughout the area, we in the School Health Service are sincerely grateful.

JAMES KELMAN,
M.D., D.P.H.
County Medical Officer.

County Health Department,
PERTH. December, 1957.

1. LIST of STAFF.

Chief School Medical Officer: James Kelman, M.D., D.P.H.

Medical Officer - Perth City Schools: John M. Aitken, M.B. Ch.B., D.P.H.

Assistant School Medical Officers:

John B. Jack, M.B. Ch.B. (resigned 31/3/57)
A.S. Caldwell, M.B. Ch.B., D.P.H. (appointed 10/6/57)
Sheila M. Ore, M.B. Ch.B., D.P.H.
Elspeth V. Beveridge, L.R.C.P. & S., D.Obst. R.C.O.G., D.P.H.

Senior Dental Surgeon:

M.R. Kirkland, L.D.S.

Assistant Dental Officers:

Mrs. M. Black, L.D.S.,
Miss C.J. Brunton, L.D.S.,
Miss E. Mann, L.D.S. (resigned 25/8/56).

School Nurses:

Full time: Isobel Wake (Perth City)
Part time: 50 County District Nurses
7 City Health Visitors.

Physiotherapists:

Miss A.C. Hampton (Senior)
Miss M. Hearnshaw
Miss Sheila Gatherall (appointed 7/1/57)
(Educational Gymnast).

Orthoptist:

Miss Jennifer E. MacKinlay (resigned 19/4/57)

Audiometrician:

Miss Flora Auchterlonie (appointed 20/2/57)

Orthopaedic Almoner:

Miss M. Hearnshaw (Part-time)

Clinical Assistants:

Medical Miss Vera Todd (resigned 31/1/57)
Mrs. Eliz. Cameron (appointed 4/2/57)
Dental Mrs. Freda M. Scobie
Miss Morag R. Graham (resigned 15/3/57)
Miss Christine Clayton
Miss Catherine Mowbray (appointed 18/3/57)

2. GENERAL STATISTICS.

Population of the area	134,772
Number of Schools:	
(a) Nursery)	1
Nursery classes in ordinary schools) Under	1
(b) Primary) Education	128
(c) Senior Secondary) Authority	5
(d) Junior Secondary)	18
(e) (1) Special Schools)	-
(2) Special classes in ordinary schools)	1
(f) In receipt of grant from Education Authority and under Medical Inspection	2
Average number of children on the roll	20,227
Number in average attendance during year	17,790

3. SANITARY CONDITIONS OF SCHOOLS.

This year the schools due for review are those in the Western District of Perthshire.

These are as follows:- Aberfoyle, Ardeonaig, Balquhiddy, Blairdrummond, Draco, Callander Public, Crinanlarich, Deanston, Doune, Dunblane, Dykehead, Gartmore, Glendochart, Greenloaning, Killin, Kinbuck, Kincardine, Kinlochard, Lecropt, Lochearnhead, McLaren High, Port of Menteith, St. Mary's, Strathfillan, Strathyre, Thornhill and Trossachs.

1. General. These schools were last surveyed in 1951, and in the interval a steady programme of maintenance and improvements has been carried out. At Strathyre a new school is overdue, but is now on the way. At Killin complete reconstruction is to be carried out. McLaren High and Dunblane J.S. are both out of date in many ways. Proposals for dealing with these two schools are related, and have been under consideration for some considerable time. Major reconstruction is being carried out at Gartmore and Deanston. At Aberfoyle, remodelling and additional accommodation is in progress.

The report below refers to conditions as at 31/7/57.

2. Overcrowding exists at McLaren High, Dunblane, Kincardine, Aberfoyle, Balquhiddy and Thornhill.

3. Condition of Buildings. In general the condition of the school buildings is satisfactory. At Strathyre the building is very old and the new school is very necessary. External redecoration is required at St. Mary's, Doune, Kinbuck, Callander Public and Aberfoyle. Attention to floors is required at McLaren High (hall), Deanston, Blairdrummond, Kinbuck (Infants), Aberfoyle, Gartmore, Port of Menteith, Trossachs and Thornhill. Internal redecoration is required at Kincardine (one room), Killin, Ardeonaig, Doune, Callander Public, Lecropt, Aberfoyle, Port of Menteith and Trossachs.

4. Playgrounds and playing fields. The surfaces of the playgrounds at Strathfillan, St. Mary's, Callander Public and Dykehead are rough. At Deanston the tarmac surface is unsatisfactory. At Crinanlarich the surface is rough and drainage inadequate. At Dunblane the tarmac surface requires patching. Most schools have no playing fields. At McLaren High the field is very soft in winter. At Deanston, Killin, Aberfoyle, Gartmore and Thornhill, village fields are available.

5. Shelter Sheds. These are reasonably satisfactory. At McLaren High and a few of the smallest schools no outside shelter is available. At Doune there is not enough shelter space.

6. Water Supplies. These are generally satisfactory. At Strathfillan, there is trouble with sediment. Difficulty was experienced during the year at Trossachs and Ardeonaig. Dykehead was satisfactory this year, but is often inadequate in dry spells.

7. Washhand Basins. Considerable improvement has been carried out since last Report, and hot water is being introduced in a steady programme. At McLaren High, Balquhiddy and Dunblane the position is not satisfactory. In nearly all schools, towels are changed twice weekly. At Killin, additional basins with hot water and paper towels were provided in emergency at the request of the County Medical Officer because of an outbreak of dysentery.

8. Latrines and Urinals. These are generally satisfactory, but as the programme of modernisation proceeds, the toilets are being resited as an integral part of the school buildings.

9. Ventilation. In general, the ventilation of the schools is satisfactory.

10. Lighting. All schools in this group now have electric light.

11. Heating. An increasing number of schools have central heating. The very small schools have stoves or open fires, in a number of cases supplemented by background electric heating. At McLaren High the heating in the main building tends to be inadequate. Killin, Glendochart, Ardeonaig, Lecropt and Gartmore need more background heating.

12. Facilities for drying clothes. Where there is central heating, there are usually hot pipes. The smallest schools depend on open fires.

13. Cloakrooms. The accommodation at Killin, Balquhiddy and Thornhill, is inadequate.

14. Cleansing. Floor sweeping compound is generally used. The schools are kept in a clean condition.

15. School furnishings. A regular programme of replacement of old style furniture is nearly completed.

16. Dining Accommodation. This varies from place to place - outside halls, separate buildings, general purpose rooms, or in a few cases a classroom. The accommodation is generally satisfactory and kept in a satisfactory condition.

17. Improvements throughout the County. Playground surfacing has been carried out at Longforgan, Kinnaird, Kilspindie, Forteviot, Pitcairn, Kinbuck, Greenloaning, Kinross and Northern District. Electric heating for toilets has been provided at eleven schools. The toilets have been improved at Scone, Longforgan, Arngask, Burrelton and Killiecrankie. Hot water has been introduced at St. Madoes, Glendelvine, Pitlochry, Foss, Georgetown, Dunning Infants, Crianlarich, Craigie, Redgorton, Kirkmichael, Strone of Cally. Additional electric heating has been provided at Craigie (annexe), St. Madoes, Kirkmichael and Ardler. Shelter sheds have been provided at Butterstone, Killiecrankie, St. Fillans and Dykehead. A new staffroom, equipped for medical purposes has been provided at Dunning Senior.

Major schemes in hand are: Goodlyburn Primary nearing completion; Goodlyburn J.S. under construction; Kinross west wing completed; Perth High additional accommodation completed; Stanley nearing completion; Breadalbane, Dunbarney and St. Stephen's under construction; Pitlochry completed; Deanston reconstruction started; Guildtown first part completed; Invergowrie completed; Blairgowrie High under construction; Aberfoyle started; Perth Junior Academy started; Gartmore reconstruction in progress; Perth Old Academy improvements under way.

The following major schemes are either in preparation or under active consideration; Killin, Kincardine, Fortmoak new school, Aberuthven (badly required), Coupar Angus, Strathgryne new school, Auchterarder, Kinnoull, Invervar, Crieff J.S., Guildtown and the new special Residential School for Mentally Handicapped children.

4. ORGANISATION AND ADMINISTRATION.

A. System and extent of medical inspection and treatment. No change occurred in the general arrangements during the year. The groups of children examined systematically during 1956-57 were (1) the entrants and (2) children born in the years 1947, 1943 and 1940. Details of the results of these examinations are shown below and in the statistical tables.

As is now usual, boosting doses of diphtheria prophylactic were given to entrants, and tuberculin testing and where necessary B.C.G. vaccination were carried out for children in the thirteen year old group. Vaccination against poliomyelitis, introduced last year, was in increased supply during the session under review. The procedures mentioned in this paragraph are National Health Service functions of the County and Town Councils as Local Health Authorities, but for convenience they are administered, on a joint basis with Perth City, within the framework of the School Health Service.

B. System and extent of dental inspection and treatment. The general arrangements were unchanged during the session under review, but only three dental officers were available during the year. Details of the work done are given later in this Report.

C. School Nursing and arrangements for following-up.

D. Co-ordination.

E. Co-operation with voluntary bodies etc.

No change has occurred under these heads.

F. Co-operation with teachers and parents.

The teaching staff have again been most helpful in referring cases to the School Medical Officers, and in co-operating to ensure the attendance of children for specialist advice and treatment. The attendance of parents at inspections was much the same as in previous years. No talks were given to Parent-Teacher Associations during the year.

5. FINDINGS OF MEDICAL INSPECTION.

The number of children examined systematically was 6,431, as against 6,597 for the previous year. In addition, the Medical Officers examined in the schools 764 special cases and made 1936 re-examinations. The number of children examined for vision only at age seven was 1817, and the number of children in employment examined was 296.

Except where otherwise stated, the figures in the following sections refer to the 6,431 children examined systematically.

1. Clothing.

Number of children examined systematically	6431	
Number with unsatisfactory clothing	3	(0.05%)
	<u>Perth City</u>	<u>Perth County</u>
Number of examinations of children by the nurses	23,134	50,618
Number with unsatisfactory clothing (including footwear)	131	40

The nurses' inspections are made without previous warning and refer more closely to the poorer groups.

2. Footwear. Only 2 (0.03) children were found with unsatisfactory footwear.

3. Cleanliness. The findings at the routine school medical inspections are not a very reliable index of cleanliness since the children may have been cleaned up for the occasion.

(a) Heads - dirty, nits or vermin	41 (0.64)
(b) Bodies - dirty or verminous	2 (0.03)

The corresponding figures for last year were (0.91) and (0.02) respectively.

The nurses' cleanliness inspections give a more reliable index since no warning is given of visits. In 23,134 examinations in Perth City Schools, 35 children were found to have verminous heads on one or more occasions, as against 48 in 1955-56, 77 in 1954-55, 84 in 1953-54. In addition, 275 children were found to have nits on one or more occasions.

In 50,618 County examinations, 43 children were found to have verminous heads on one or more occasions, the previous figures being 47 in 1955-56 and 21 in 1954-55. In addition, 175 children were found to have nits on one or more occasions.

The procedure laid down in the Education (Scotland) Act, 1946, was found to work satisfactorily. 21 formal notices were issued to parents requiring them to cleanse a total of 11 children.

4. Skin. Very few skin conditions were found at routine inspections.

(a) Heads:	Ringworm	Nil
	Impetigo	2 (0.03)
	Others	3 (0.12)
(b) Bodies:	Ringworm	Nil
	Impetigo	Nil
	Scabies	Nil
	Others	52 (0.81)

5. Nutrition. The general level of nutrition has been well maintained. Of the 6,431 children examined, 10 (0.16) were in a state of nutrition regarded as slightly defective, but in no case was it regarded as defective.

6. Mouth and Teeth. Only 106 (1.65) of the 6,431 children examined at routine inspections were considered by the medical officers to have unhealthy mouths, but these figures must be regarded as conservative when compared with the findings of the detailed examinations by the dental officers.

7. Naso-Pharynx. Most of the defects found again consisted of unhealthy tonsils and adenoids.

8 (0.12) cases were found to have slight nasal obstruction. 16 (0.25) had a degree of obstruction requiring operative treatment and 10 (0.16) had other nasal conditions.

In 107 cases (1.66) the tonsils were enlarged but not unhealthy. In 38 (0.59) cases it was considered that removal of the tonsils and/or adenoids was necessary.

15 cases (0.23) had glandular enlargement requiring observation, and 2(0.03) probably requiring surgical treatment.

8. Eyes. The usual external diseases of the eyes, blepharitis and conjunctivitis are now uncommon. The cases found were treated, either at the school clinic or by the District Nurses. Strabismus (squint) remains a relatively common defect in this area. Cases of squint and defective eyesight are referred to the Eye Specialist.

Of the 6,431 children examined, 24 (0.37) were found to have blepharitis and 2 (0.03) conjunctivitis. 58 (0.90) were found to have strabismus of varying degrees. 6 (0.09) were found to be suffering from other eye conditions.

526 children (8.18) were found to have some degree of defective vision. Of the 1817 children examined for vision at age seven, 143 (7.87) had some degree of defective vision, 132 (7.26) having fair vision (not worse than 6/12 in the better eye) and 5 (0.27) having bad vision (worse than 6/12 in the better eye).

9. Ears. 8 children (0.12) were found at routine inspection to be suffering from otorrhoea and 5 (0.08) suffered from other diseases of the ear.

12 cases of defective hearing were found at routine inspection. 8 of these cases were classified as Grade I (capable of education in an ordinary classroom), 2 as Grade II(a) (capable of education in an ordinary class if seated near the teacher) nil as Grade II(b) (requiring special education, but not of the type required for those whose speech and language are seriously affected) and 2 as Grade III (so deaf that speech and language are seriously defective and requiring education as for deaf and dumb children).

10. Speech. 19 children (0.29) were found to have defective articulation, and 7(0.11) were found to suffer from stammering.

11. Mental and Nervous Conditions. The cases referred to below are those brought to notice for the first time during routine inspections.

(a) Backward	3 (0.05)
(b) Dull	8 (0.12)
(c) Mentally defective (educable)	7 (0.11)
(d) Mentally defective (ineducable)	-
(e) Highly nervous or unstable	4 (0.06)
(f) Difficult in behaviour	3 (0.05)

12. Circulatory System. 28 children were found at routine inspection to have organic heart disease, congenital in 14 cases (0.22) and acquired in 14 cases (0.22). 29 (0.45) were found to have functional heart conditions.

13. Lungs. 13 children (0.20) were found to have chronic bronchitis, 9 (0.14) suspected tuberculosis and 30 (0.47) had other chest conditions including asthma.

14. Deformities. The cases referred to below are those included in the groups systematically examined, but the majority were already known to the Orthopaedic Department.

(a) Congenital deformities	64 (0.99)
(b) Acquired (infantile paralysis)	11 (0.17)
(c) Acquired (probably rickets)	4 (0.06)
(d) Acquired (other causes)	52 (0.81)

15. Infectious Disease. It is very unusual to find any of these cases at systematic inspections.

16. Other diseases and defects. Nothing unusual was found under this heading. The total found was 70 (1.09)

17. Vaccination. 83.14% of all children examined were found to have been vaccinated. The percentage varied slightly between the age groups - entrants 81.52%, 1947 group 86.92%, 1942 group 80.75% and 1940 group 90.14%.

18. Heights and weights. The table below gives the average heights and weights found.

Year 1956-57.

<u>Group</u>		<u>Number Examined</u>	<u>Average</u>		<u>Average</u>	
			<u>Age</u>		<u>Height</u>	<u>Weight</u>
			<u>years</u>	<u>months</u>	<u>ins.</u>	<u>lbs.</u>
Entrants	B	946	5	4	44.0	45.0
	G	916	5	3	44.9	42.5
Nines (1947)	B	1108	9	7	53.2	67.9
	G	1087	9	3	51.6	64.2
Thirteens (1943)	B	831	13	6	60.3	101.2
	G	805	13	5	60.9	103.5
Sixteens (1940)	B	127	16.3	4	67.7	138.5
	G	157	16	5	66.1	125.9

6. TREATMENT.

A. Minor Ailments.

(1) Cuts, Bruises, Sprains and Minor Injuries. In Perth City treatment is available for those cases at the school clinic. Suspected fractures or other injuries requiring X-ray or special treatment are referred to Perth Infirmary. In the County, cases are treated by the teachers or district nurses. First aid requisites are supplied to all schools, with special outfits for the science and practical classes, and these are replenished as required.

Details of cases treated at the Perth Clinic are as follows:-

Cases treated during the year	525
Cases ceasing to attend	cured 524
	improved -
Cases under treatment at end of year	1

(2) Diseases of the ear. In Perth City cases are treated by the School Clinic. County cases are treated either by the District Nurses or the family doctors. Cases treated at Perth Clinic:

Cases treated during the year	83
Cases ceasing to attend	cured 83
	improved -
Cases under treatment at end of year	-

During the session 15 Ear, Nose and Throat clinics were held at which there were 164 examinations of children by the Specialist. 18 cases were recommended for removal of tonsils and adenoids and 20 cases for removal of adenoids and 5 for removal of tonsils only; 37 of these cases were done before the end of the session. 16 cases of otorrhoea and 11 nasal cases were dealt with. 56 cases of catarrhal deafness/

deafness were successfully treated by politzeration. In 4 cases conservative treatment was advised. 11 were referred for investigation of sinuses; 4 cases were referred to the Speech Therapist. There were 13 cases of pharyngitis, 2 of laryngitis, 1 aural polyp and 4 cases of catarrhal otitis.

(3) Diseases of the eye, excluding defective vision. Cases usually consist of styes, blepharitis or conjunctivitis. These are treated by the Clinic or the District Nurses. 188 cases were treated at the Perth Clinic this year.

(4) Diseases of the Skin. (a) Ringworm of the Scalp. In the last Report reference was made to a serious outbreak of ringworm of the scalp at Kinross. This was discovered on 16/2/56, and involved 31 cases at Kinross School plus 5 cases amongst pre-school children, and 1 case at Portnoak School, a total of 37 florid cases. In addition there were 4 very mild cases (only 3 or 4 infected hairs treated by manual epilation). The 37 florid cases were treated either by X-rays (21 cases), Thallium (10 cases) or manual epilation (5 cases) and 1 case developed kerion and cleared satisfactorily without other treatment. By the end of the session all but three of the cases were regarded as clear.

During the summer holidays supervision was continued, but with intermittent absences was not very effective. A detailed survey of all the cases in the first week of the new session showed that 4 of the cases had relapsed. Only one or two fluorescent hairs were seen, however; these were manually epilated and the children continued at school. Supervision continued throughout the session. Of the 37 original cases, 26 remained clear throughout. Details of the remaining cases are given below.

- | | |
|----------------|--|
| (1) Boy, G.M. | (Satisfactory X-ray epilation 19/3/56). Clear from 24/8/56 |
| (2) Boy, R.D. | (Satisfactory X-ray epilation 19/3/56). Clear from 24/8/56 |
| (3) Girl, A.B. | (Good Thallium epilation 9/3/56). Clear until 21/6/57, when tiny patch noted. Clear 13/11/57. |
| (4) Boy, S.C. | (Satisfactory X-ray epilation 16/3/56). Single hairs found 3/8/56 and 4/12/56. Clear since. |
| (5) Boy, I.S. | (Unsatisfactory Thallium epilation 26/5/56). Manual epilation thereafter. Clear 13/3/57. |
| (6) Girl, C.K. | (Partial Thallium epilation 10/4/56). Single hairs found 21/9/56 and 16/10/56. Clear thereafter. |
| (7) Boy, J.G. | (Poor X-ray epilation 20/3/56). Odd hairs till 5/1/57, clear thereafter. |
| (8) Boy, S.M. | (Poor X-ray epilation 21/3/56). Manual epilation thereafter. Still a few infected hairs 7/8/57. |
| (9) Boy, D.O. | (Good Thallium epilation 26/5/56). Odd hairs till 21/9/56, thereafter clear. |
| (10) Boy, G.C. | (Good Thallium epilation 24/3/56). Odd hairs till 5/1/57, thereafter clear. |
| (11) Boy, H.D. | (Unsatisfactory Thallium epilation 3/4/56). Manual epilation thereafter. Clear from 21/9/56. |

At the end of the session, therefore, there were still 2 cases showing occasional infected hairs. Experience shows that it will be necessary to continue supervision of the whole group for some time yet.

(b) Other skin conditions. 5 cases of scabies and 74 cases of impetigo were dealt with during the session. All the cases were mild and cleared up without difficulty. 181 other skin cases were dealt with. Some two-thirds of these were warts on the hands, knees and face. These occurred in most of the City schools and the numbers at the beginning of the 1957-58 session were similar to last year.

B. Defective Vision and Squint. Eye Clinics for school children, primarily a function of the Regional Hospital Board, are run on a joint bases within the School Health Service. Pre-school children are also dealt with at these clinics.

The number of new cases examined for the first time was 416, including 72 children under five years of age. Of these cases, 298 were examined at the Perth Clinic, 42 at Crieff, 27 at Dunblane, 9 at Aberfeldy, 11 at Blairgowrie, 13 at Pitlochry, 16 at Kinross. 82 of these cases were squints and in 43 cases no defect was found by the Specialist. The remaining 291 cases were classified as follows:-

Simple Hypermetropia	31 (10.55)
Simple Myopia	67 (23.02)
Hypermetropic Astigmatism	19 (6.53)
Myopic Astigmatism	10 (3.44)
Compound Hypermetropic Astigmatism	77 (26.46)
Compound Myopic Astigmatism	21 (7.22)
Mixed Astigmatism	54 (18.56)
Other conditions	12 (4.12)

The number of children re-examined was 1760, and the total number of refractions was 2,176. Spectacles were ordered in 876 cases.

The total number of cases seen by the Orthoptist during the year was 227. 65 of these were seen only once for diagnostic purposes. 67 attended for supervision whilst undergoing a course of occlusion to re-establish good visual acuity in the squinting or amblyopic eye. 60 cases were given orthoptic exercises to improve their binocular function. 60 cases were kept under observation to ensure that no deterioration took place either in the state of binocular function or the visual acuity. The number of attendances by the 227 cases was 1214.

C. Nose and Throat - operative treatment. Altogether 154 cases were done at Perth Royal Infirmary and a further 161 at Bridge of Earn Hospital, of which one and 37 respectively had been referred through the School Health Service. At the end of the session the number of cases on the School List awaiting operation was 23.

In the Western District, 42 cases were done at Stirling Royal Infirmary, all having been referred by general practitioners.

D. Hearing Testing. During 1955-56 the County Council approved of the purchase of a pure tone audiometer and the appointment of an Audiometrician. Because of difficulty regarding training, it was not possible to put this into effect until 29/3/57, when an appointment had been made and training provided by courtesy of the School Health Service and the Deafness Clinic at Dundee.

During the remainder of the session, 13 of the largest schools were surveyed 2344 children were tested and of these 2257 (96%) were found to have normal hearing. The remaining 87 children were found to have defective hearing of varying degree: 52 Grade I, 29 Grade IIa and 6 Grade IIb.

So far 73 of these children have been seen by the School Medical staff. In 17 cases wax was present. 8 of these cases were referred to the family doctor. In 9 cases the wax was removed at the school clinic with improvement in 7 cases.

35 cases have so far been seen by the E.N.T. Specialist. Treatment at the clinic has been provided in 11 cases, and removal of tonsils and/or adenoids advised in 10 cases. 8 cases are still under review. In 6 cases the disability was regarded as permanent, and appropriate advice on placing given.

The aim is to ensure that every child should have a routine hearing test by age 8 years. This is being done at the larger schools, but at the smaller school it has been found advisable at this stage to test all children except a few of the very youngest. This has been necessary to conserve staff time because of transport difficulties.

E. Orthopaedic Treatment. This Regional Hospital Board service, dealing with children of all ages, is administered within the framework of the School Health Service, and is based on the Perth School Clinic.

During the session, 1934 school children were seen by the Orthopaedic Surgeon and 102 school children were admitted to hospital (Bridge of Earn). The Physiotherapists dealt with 921 children for care and aftercare, giving 6332 treatments.

7. DENTAL INSPECTION AND TREATMENT.

Mr. M.R. Kirkland, L.D.S., Senior Dental Officer, has prepared the following report.

The past session has been a difficult one for the School Dental Service. It commenced with the loss of one dental officer due to resignation, reducing the already inadequate strength of the staff from four to three. The situation deteriorated further owing to the illness of another dental officer, which had the effect of reducing the staff to two for some months. Fortunately this officer has recovered and resumed duties. It is encouraging to be able to report that after a year's failure to obtain another dental officer to fill the gap caused by resignation, it has now been possible to get a replacement who will be commencing on October 1st.

The effects of the lack of staff during the past year are reflected in the accompanying statistics of work carried out. More serious, however, is the effect on the interval between inspections, which was already too long, and has now reached the point at which the service has little or no continuity or long-term value. It is an absolute essential of an effective dental service that inspection and completion of all necessary treatment be carried out both regularly and frequently. In the report for last year, attention was drawn to the increasing period between inspections, and the effects noticeable then have become more acute during the year under review.

In order to deal with this problem, efforts will have to be maintained to raise the strength of the staff to a level at which a more regular and frequent service can be provided. However, in the light of past experience and present trends, this is not likely to be achieved easily or rapidly and in the meantime many teeth are being lost because parents are delaying dental treatment for their children until the dental officer comes round, by which time it may be too late to save the teeth. This suggests the desirability of letting the parents know the position, so that they do not rely too heavily upon this Service under the present circumstances. To this I would add the proposal that the operative strength be diverted largely to those points where the need is greatest, i.e. to those areas where there are no other dental facilities.

The services of the Orthodontic Consultant to the Eastern Regional Hospital Board have been available during the year. Regular sessions have been held at the Perth Clinic under his supervision and they are of great value.

The mobile unit has been in constant use and has proved to be indispensable. Owing to the shortage of staff, it has only been possible to make limited use of the new surgery at Perth High School, but from October it will be in regular operation. The facilities and equipment in this surgery are extremely good.

In many of the country schools in the past, operating conditions have been very poor, and it has been necessary to use portable equipment capable of being carried around by car. This by itself has not made it any easier to obtain the services of Dental Officers in these times of continual shortage. Conditions, however, are improving, due to reconstructions or new buildings, and it will not be long now before all the larger schools will have a permanent medical suite, and all except the smallest schools will have improved staffrooms adapted for medical and dental purposes. It is now proposed that more up to date and more efficient equipment be provided for use in these schools. This will be heavier than the portable type of kit which will continue to be used in the smallest schools, but since it will be used in schools where there is sufficient work to occupy a dental officer for at least three or four weeks, the transport involved need not be a large item.

Finally I should like to express my appreciation of the co-operation received from the teaching staffs at the various schools, and the advice and encouragement which has been readily available from the County Medical Officer.

Summary/

Summary of the Work Done.

1. Inspected by the Dental Officers:

Age	(a) Systematic Examinations	(b) Special and Emergency Cases	TOTAL
4	2	-	2
5	160	11	171
6	221	38	259
7	294	53	347
8	448	75	523
9	469	63	532
10	428	73	501
11	247	43	290
12	365	32	397
13	375	40	415
14	29	30	59
15	-	4	4
16	-	3	3
17	-	1	1
	<u>3038</u>	<u>466</u>	<u>3504</u>

	<u>Systematic Examinations</u>	<u>Special and Emergency cases</u>
2. Found to require treatment	1848	466
2(a). Number of Acceptances	1050	466
3. Actually treated by the School Dental Officers	1178	466
4. Number of attendances made by children for treatment	5136	466
5. Fillings (a) Permanent teeth	3593	3
(b) Temporary teeth	38	1
6. Extractions (a) Permanent teeth	290	96
(b) Temporary teeth	970	256
7. General anaesthetics for extractions	193	-
8. Other operations (a) Permanent teeth	3026	246
(b) Temporary teeth	890	61
9. Halfdays devoted to Inspections	84	-
9(a) Halfdays devoted to Treatment	1167	-
10. Number of children treated under private arrangement	-	-
Number of Partial Upper Dentures	15	
Number of Orthodontic Appliances	36	
Number of Gold Inlays	1	

8. SPECIAL SCHOOLS AND CLASSES.

(a) Physically defective children. There are no special schools or classes, but during the session 2 children were in Trefoil Residential School.

(b) Blind and partially sighted children. There are no special classes. During the session there were 4 children from this area in the Royal Blind Asylum and School, Edinburgh, and 5 children at the Sight Saving School, Dundee.

(c) Deaf, partially deaf and deaf mute children. There are no special classes. 16 children were in schools outwith the area; 7 in Donaldson's School for the Deaf, Edinburgh, 7 in the Institution for the Deaf and Dumb, Dundee; and 2 in St. Vincent's School for the Deaf, Glasgow.

(d) Mentally Handicapped Children. The class at Southern District School was restarted on 4/2/57 with 14 children in attendance. 7 educable mentally handicapped children were accommodated outwith the County: 5 in Baldovan Institution/

Institution, Dundee; 1 in Waverley Park Home, Kirkintilloch and 1 in Fairmuir Special School, Dundee.

(e) Retarded Children. As far as possible, these are placed in ordinary classes suitable to their level of intelligence.

(f) Residential School for Mentally Handicapped Children. Last year it was reported that the County Council had agreed in principle to provide a residential school for mentally handicapped children, but that Central approval had been deferred pending firm figures of children in the area requiring such education, instead of the estimates previously given. The detailed assessments necessary have been carried out and the figures reported. This work was undertaken by the school medical staff and the Educational Psychologist with some reluctance since relatively few of the children now ascertained can hope to benefit by the proposed school which is still some years in the future and it was felt that it would be unfortunate if parents were thus led to expect early provision. However, the detailed work of planning the new school is going forward and it is to be hoped that there will be no new developments to delay erection. It is hoped to provide new building on a site near Perth to provide for a number of day pupils as well as the residential pupils.

(g) Child Guidance. The Educational Psychologist took up duty in May, 1956, and his detailed report on the work during the session has been submitted to the Education Committee.

The need for this service has been amply confirmed by the flood of cases referred. Working single handed, he has been able to deal with 192 of the 411 cases referred, leaving a waiting list of 219 at the end of the session. The cases seen during the year covered the whole age range from 3 to 16 years and the whole range from serious mental defect to superior intelligence level. The majority of cases were seen for diagnosis or advice, but it was possible to provide treatment in Perth for a limited number of children.

The accommodation available in Perth during the session has been very limited, but improved facilities should be ready for use by the end of 1957.

This represents an excellent beginning but we are still some considerable distance from achieving a full Child Guidance Service available freely throughout the area. So far the work has been mainly centred in Perth. It will be necessary to develop District Clinics to meet the need of the County areas. There is work for at least one additional Psychologist now and it will be necessary to secure the services of a Psychiatrist from the Regional Hospital Board staff. Probably a Psychiatric Social Worker will also be required to complete the team. Already there is very close co-operation with the School Medical Staff and altogether the service is developing along sound lines.

(h) Occupational Therapy. The voluntary Occupational Centre at Blairgowrie, originally started with the encouragement and help of the County Council, has now been taken over by the Education Committee and meets daily. Arrangements are now in hand to start an occupational centre in Perth, which should become available early in the new session.

(i) Speech Therapy. A full report on the work of the two Speech Therapists during the session has been submitted to the Education Committee. Two Therapists have been available since September, 1956, and in addition to the main centre in Perth, centres are now established in Blairgowrie, Kinross, Dunblane and Auchterarder. 83 City cases and 68 County cases received treatment during the year, but at the end of the session there was a waiting list of 289 children (County 133, City 135, Pre-school 21). It is hoped in the new session to treat more children in groups, a method which is not only very beneficial in certain cases, but should also do something to reduce the size of the waiting list. Close co-operation has been established with the School Health Service, and full use has been made of the help available from the School Medical Staff, the E.N.T. Specialist and the Audiometrician.

9. ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE.

The Department of Health recommends that a proportion of the schools in the area should be surveyed under this heading each year. This year the schools in the Western District are due for review.

A. Accommodation for Physical Exercises. The only school which has a gymnasium is McLaren High. Other schools use outside halls or in some cases a spare room and when the weather is suitable exercises are given in the playground.

(a) Facilities for change of shoes and clothing. Change of shoes is almost universal, but no separate facilities are provided for this, except at McLaren High where clothing is changed.

(b) Spray Baths. These are available at McLaren High.

(c) Provision of towels, hot water etc. Towels are provided at all schools and the number of schools with hot water is steadily increasing.

(d) School Intervals. The usual interval is 10 - 15 minutes in the forenoon and 5 - 10 minutes in the afternoon.

B. Swimming Baths. There are none.

C. Playing Fields. See earlier in this Report.

D. School Camps. School Camps are not available for children in the schools reviewed this year, but during the summer of 1957, 237 children from schools in Perth City were accommodated for a fortnight at Belmont Camp, Meigle.

E. Practical Instruction in Personal and Communal Hygiene. In all schools some instruction in hygiene is given by the class teachers. In secondary schools this is also given by teachers of physical instruction and domestic subjects, based on the Scheme drawn up by the Scottish Council for Health Education. When time permits, brief talks are given by the Medical Officers at their visits.

F. Parent-Teacher Associations. There are now parent-teacher associations at a number of the schools under review.

10. OTHER ACTIVITIES IN RELATION TO THE HEALTH OF SCHOOL CHILDREN

(a) Milk in Schools. Milk is available in 147 schools and 80% of the pupils in these schools take milk. In each case the source of the supply is approved by the Medical Officer of Health, the milk being either T.T. or pasteurised.

(b) School Meals. School meals are now served at 150 schools, leaving only 2 unprovided for. The 26 kitchens provided 1,729,363 meals during the session. A Fife cooking centre supplied 7 schools and provided 55,299 meals not included in the above total.

T A B L E I.

(A) Total number of children examined at:-		Systematic Examinations	Other Systematic Examinations
Ordinary Schools	(Entrants	1862	
	(Second Age Group	2195	
	(Third Age Group	1636	
	(Fourth Age Group	284	
Secondary Schools	(Age Group	-	
TOTAL			
		<hr/>	<hr/>
		5977	454
			<hr/>
			6431

(B) Other Examinations

Special cases	764
Re-inspections by Medical Officers	1936
	<hr/>
	2700
	<hr/> <hr/>

Number of individual children inspected at Systematic Examinations who were notified to parents as requiring treatment, (excluding uncleanliness and dental caries):-

Entrants	277
Second Age Group	274
Third Age Group	234
Fourth Age Group	34
Secondary Age Group	-
Other systematic examinations	68
	<hr/>
	887
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TABLE II.

SYSTEMATIC EXAMINATIONS.

Return of number and percentage of individual children in each age group suffering from particular defects

Nature of Defect	Entrants		Second Age Group		Third Age Group		Fourth Age Group		Other Ages		TOTAL
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
1. Clothing unsatisfactory	946	916	1108	1087	831	805	127	157	236	218	6431
2. Footgear unsatisfactory		2 0.22	1 0.09			1 0.12					3 0.05
3. Cleanliness:						1 0.12					2 0.03
(a) Head: dirty, nits of vermin											
(b) Body: dirty, verminous	1 0.11	11 1.20	1 0.09	16 1.47	2 0.24	9 1.12			1 0.46		41 0.64
4. Skin: (a) Head: Ringworm	1 0.11				1 0.12						2 0.03
Impetigo					1 0.12						2 0.03
Other diseases		2 0.22	1 0.09	3 0.28				1 0.64	1 0.42		8 0.12
(b) Body: Ringworm											
Impetigo											
Scabies											
Other diseases	6 0.63	6 0.66	11 0.99	7 0.64	7 0.84	9 1.12	2 1.57	2 1.27	1 0.42	1 0.46	52 0.81
5. Nutritional State:											
Slightly defective		1 0.11	5 0.45		1 0.12				2 0.84	1 0.46	10 0.16
Bad											
6. Mouth and teeth unhealthy	12 1.27	14 1.53	43 3.88	15 1.38	8 0.96	2 0.25	1 0.79		8 3.39	3 1.38	106 1.65
7. Naso-Pharynx (a) Nose											
(1) Obstr. req. obs.	1 0.11	3 0.33	2 0.18	1 0.09						1 0.46	8 0.12
(2) Obstr. req. op. tr.	2 0.21	4 0.44	4 0.36	2 0.18					2 0.84	2 0.92	16 0.25
(3) Other conditions	2 0.21		6 0.54				2 1.57				10 0.16
(b) Throat:											
(1) Tonsils req. obs.	33 3.49	48 5.24	7 0.63	8 0.73	2 0.24	2 0.25			3 1.27	4 1.83	107 1.66
(2) Tonsils req. op. tr.	13 1.37	16 1.75	2 0.18	5 0.46		2 0.25					38 0.59
(c) Glands: (1) Req. Obs.	5 0.53	3 0.33	1 0.09	3 0.28		1 0.12			1 0.42	1 0.46	15 0.23
(2) Req. op. tr.	6 0.63	3 0.33	3 0.27	3 0.28	1 0.12	3 0.67		1 0.64			2 0.03
8. Eyes (a) Ex. Dis.					5 0.60						24 0.37
Elephantitis											
Conjunctivitis					1 0.12					1 0.46	2 0.03
Strabismus	16 1.69	22 2.40	9 0.81	4 0.37	3 0.36	1 0.12			2 0.84	1 0.46	58 0.90
Other diseases	3 0.32		2 0.18	1 0.09							6 0.09
(b) Visual acuity:											
Fair vision	7 0.74	5 0.55	67 6.05	109 10.03	84 10.11	115 14.29	17 13.39	25 15.92	15 6.35	20 9.17	464 7.20
Bad vision		1 0.11	6 0.54	11 0.99	8 0.96	13 1.60	7 5.51	2 1.27		1 0.16	49 0.76
Rec. for refraction	1 0.11	1 0.11	4 0.36	1 0.09	4 0.48	2 0.25					13 0.20

TABLE II (CONT'D)

	Entrants		Second Age Group		Third Age Group		Fourth Age Group		Other Ages		Total
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	
9. Ears (a) Diseases											
Otorrhoea	3 0.32		1 0.09		3 0.36				1 0.42		8 0.12
Other diseases	1 0.11			2 0.18	1 0.12				1 0.42		5 0.08
(b) Defective hearing											
Grade I	1 0.11		3 0.27	2 0.18	1 0.12		1 0.79				8 0.12
Grade IIa	2 0.21										2 0.03
Grade IIb											
Grade III											
10. Speech: Def. articulation	4 0.42	4 0.44	6 0.54	1 0.09	2 0.24	1 0.12			1 0.42		2 0.03
Stammering	3 0.32		1 0.09		1 0.12	1 0.12			1 0.42	1 0.46	19 0.29
11. Mental & nervous condits.											7 0.11
(a) Backward				1 0.09							
(b) Dull	1 0.11		2 0.18		2 0.24	1 0.12			1 0.42	1 0.46	3 0.05
(c) Men. Def. (educable)			2 0.18	3 0.28	1 0.12	1 0.12			1 0.42	1 0.46	8 0.12
(d) Men. Def. (ineduc)											7 0.11
(e) Highly nervous or unstable											
(f) Difficult in behaviour	1 0.11	1 0.11	1 0.09			2 0.25			1 0.42		4 0.06
12. Circulatory System											3 0.05
(a) Organic heart disease											
(1) Congenital	4 0.42	5 0.55	1 0.09	1 0.09	2 0.24	1 0.12				1 0.46	14 0.22
(2) Acquired			4 0.36	2 0.18	3 0.36	4 0.50					14 0.22
(b) Functional condts.	5 0.53	3 0.33	6 0.54	5 0.46	6 0.72	1 0.12		1 0.64	2 0.84		29 0.45
13. Lungs: Chr. Bron.	7 0.74	2 0.22	1 0.09	1 0.09	2 0.24			1 0.64	1 0.42		13 0.20
Sus. Tuberculosis			2 0.18	3 0.28	2 0.24				2 0.84		9 0.14
Other diseases	6 0.63	4 0.44	4 0.36	2 0.18	7 0.84	2 0.25	3 2.36				30 0.47
14. Deformities											
(a) Congenital	10 1.06	5 0.55	17 1.53	10 0.92	11 1.32	8 0.99		1 0.64	2 0.84		64 0.99
(b) Acq. (inf. par.)	1 0.11	1 0.11	2 0.18	1 0.09	1 0.12		1 0.79		2 0.84	2 0.92	11 0.17
(c) Acq. (pro. rickets)	1 0.11	1 0.11			1 0.12				1 0.42		4 0.06
(d) Other causes	7 0.74	6 0.66	9 0.81	6 0.55	9 1.08	7 0.87	2 1.57	1 0.64	4 1.69	1 0.46	52 0.81
15. Infectious Diseases											
16. Oth. dis. or defects	7 0.74	8 0.87	26 2.35	9 0.82	4 0.48	2 1.57	2 1.57	3 1.91	5 2.12	4 1.83	70 1.09
17. Vaccinations	773 81.71	745 81.33	996 87.18	942 86.66	696 83.75	625 77.64	112 88.19	144 91.72	182 77.12	162 74.31	5347 83.14
18. Parents present	594 62.79	559 61.03	511 46.11	554 50.97	204 24.55	187 23.23	16 12.59	18 11.46	59 25.0	57 26.15	2759 42.90
19. Diphtheria Immunisation	878 92.81	863 94.21	109 92.87	101 93.01	738 88.81	686 85.22	122 96.06	148 94.27	198 83.90	181 83.03	5854 91.0

TABLE III.

SYSTEMATIC MEDICAL EXAMINATIONS

	Entrants		Second Age Group		Third Age Group		Fourth Age Group		Other ages		Total	
	No. of children	Percent- age of the chil- dren exmd in this group	No. of children	Percent- age of the chil- dren exmd in this group	No. of children	Percent- age of the chil- dren exmd in this group	No. of children	Percent- age of the chil- dren exmd in this group	No. of children	Percent- age of the chil- dren exmd in this group	No. of children	Percent- age of the chil- dren exmd in this group
I. Children free from defects	1586	85.17	1799	81.95	1315	80.36	218	76.49	364	80.19	5282	82.13
II. Children (otherwise free from defects) who suffer from -												
(a) Def. vision not worse than 6/12 in better eye with/without glasses)	18	0.97	176	8.04	188	11.52	41	14.34	33	7.32	456	7.09
(b) Conds. of mouth & teeth requiring treatment	20	1.07	36	1.64	4	0.24	-	-	9	1.94	69	1.07
(c) Both (a) and (b)	38	2.04	212	9.68	192	11.76	41	14.34	42	9.26	525	8.16
III. Children suffering from ailments (other than those mentioned in II) from which com. recovery is anticipated within a few weeks	173	9.32	94	4.28	54	3.32	9	3.26	18	3.99	348	5.41
IV. Children suffering from (or suspected to be suffering from) def. less remediable than def. spec. in II an III distinguishing cases												
(a) where com. cure or restoration of function (in case of eye defs. full correction) is considered possible	57	3.05	83	3.77	62	3.77	14	5.28	21	4.57	237	3.69
(b) where impr. only is considered possible e.g. without com. restoration of func.	8	0.42	7	0.32	13	0.79	2	0.63	9	1.99	39	0.61
Total	65	3.47	90	4.09	75	4.56	16	5.91	30	6.56	276	4.30
Total number of children examd.	1862	100%	2195	100%	1636	100%	284	100%	454	100%	6431	100%

TABLE IV.

RETURN OF ALL EXCEPTIONAL CHILDREN OF SCHOOL AGE IN THE AREA.

	At Ord- inary Schools	At Spec. Schs. or Classes	At no Sch. or Instit- ution	TOTAL
1. Blind	-	2	-	2
2. Partially sighted:-				
(a) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition	-	3	-	3
(b) Other conditions of the eye e.g. cataract, ulceration etc., which render the child unable to read ordinary school books or to see well enough to be taught in an ord. sch.	2	3	-	5
3. Deaf.				
Grade I 	18	-	-	18
Grade IIa 	14	-	-	14
Grade IIb 	3	-	-	3
Grade III 	7	14	-	21
4. Defective Speech:				
(a) Defects of articulation requiring special educational measures	16	-	-	16
(b) Stammering, requiring special educational measures	8	-	-	8
5. Mentally defective (children between 5 and 16 years)				
(a) Educable (I.Q. app. 50-70)	80	16	3	99
(b) Ineducable (I.Q. generally less than 50)	12	27	42	81
6. Epilepsy:				
(a) Mild and occasional	15	-	-	15
(b) Suitable for care in a residential school (severe)	7	-	1	8
7. Physically defective (children between 5 and 16 years)				
(a) non-pulmonary tuberculosis (excluding cervical glands)	24	3	-	27
(b) General orthopaedic conditions	593	9	5	607
(c) Organic heart disease	42	-	3	45
(d) Other causes of ill-health	18	2	-	20
8. Multiple Defects	31	12	22	65

APPENDIX.

TUBERCULIN TESTING AND B.C.G. VACCINATION.

Session 1956-57.

* - Not included in totals

School	% Consent	Boys		Girls		Boys and Girls			Re-tests
		No. Tested	% positive	No. Tested	% positive	No. Tested	% positive	No. Vaccinated	
<u>Perth City</u>									
Perth Academy	97	117	18	112	19	229	19	187	
Perth High	96	131	15	131	20	262	18	216	
St. John's R.C.	86	29	21	21	5	40	17	43	
Total	96	277	17	264	18	541	18	446	498
<u>Perth District</u>									
Errol	88	10	30	15	7	25	16	21	19
Invergowrie	75	16	25	10	20	26	23	20	7
Scone	82	23	30	29	24	52	27	38	20
Stanley	96	14	36	23	13	37	22	29	29
Methven	95	25	20	25	24	50	22	39	24
Dunbarney	95	22	9	16	19	38	13	33	19
Kilgraston*	-	-	-	18	33	18	33	12	11
Trinity College*	-	43	44	-	-	43	44	21	20
Total	89	110	24	118	19	228	21	180	99
<u>Eastern District</u>									
Blairgowrie	87	52	14	58	28	110	22	86	100
Alyth	94	24	50	21	52	45	51	22	23
Coupar Angus	84	20	40	19	32	39	36	25	12
Total	88	96	27	98	34	194	32	133	135
<u>Highland District</u>									
Breadalbane Academy	99	34	29	34	26	68	28	49	72
Dunkeld	89	12	17	5	20	17	18	14	11
Pitlochry	92	23	22	25	40	48	31	33	21
Croftinloan*	-	5	20	-	-	5	20	4	-
Total	95	69	24	64	31	133	28	96	104
<u>Central District</u>									
Crieff J.S.	88	38	21	31	19	69	20	55	38
Morrison's Academy	88	39	18	39	21	78	19	63	154
Comrie	95	8	13	11	-	19	5	18	11
Auchterarder	93	28	32	23	13	51	23	39	37
Lawers Sch. of Agri.*	-	12	42	-	-	12	42	7	6
Seymour Lodge*	-	-	-	9	11	9	11	7	11
Total	90	113	22	104	15	217	20	175	240
<u>Western District</u>									
Dunblane	85	21	10	23	13	44	11	39	38
McLaren High	95	26	12	46	35	72	26	53	84
Aberfoyle	91	9	33	6	50	15	40	9	8
Killin	75	4	50	1	-	5	40	3	2
St. Ninian's*	-	6	17	-	-	6	17	5	6
Queen Victoria's*	-	32	13	-	-	32	13	28	27
Total	90	60	17	76	29	136	25	104	132
<u>Kinross County</u>									
Kinross	80	38	24	42	28	80	26	59	38
Naemoor*	-	6	50	2	-	8	38	5	5
Total	80	38	24	42	28	80	26	59	38
COUNTY TOTALS	90	486	24	502	25	988	24	747	748
CITY & COUNTY TOTALS	91	763	21	766	23	1529	22	1193	1246